#### CONFIDENTIAL

STATE OF CALIFORNIA
DEPARTMENT OF FOOD AND AGRICULTURE
FVEQC--STANDARDIZATION

#### 40.11.01

## EACH MONTH SEND REMITTANCE [PAYABLE TO CASHIER] AND THIS FORM TO:

Cashier

Department of Food and Agriculture 1220 N Street, P.O. Box 942872 Sacramento, CA 94271-2872

Fruit and Vegetable Shipper Monthly Remittance Report/Registration 51-055 (Rev. 05/02)		Sacramento,	Sacramento, CA 94271-2872		
COMPANY NAME		REGISTRATION NUMBER			
P.O. BOX/STREET ADDRESS		AREA CODE AND TELEPHONE NUMBER	AREA CODE AND TELEPHONE NUMBER		
CITY, STATE, AND ZIP CODE			DUE DATE: Submit on the last day of the reporting Month (See # 7 on the reverse side of this form for penalty information)		
G Check this box if any of the above information has changed					
(1)	(2)	(3)	(4)		
Commodity	Number of Containers 2	Number of Containers	Assessment		
	Shipped (@ \$0.0005)	Shipped (@ \$0.0015)	Amount		
1	3	4	5		
6 SUBTOTAL					
NOTE: If there are no shipments to indicating "No Shipments Made" or	(7) (8)				
G Last report for the season. Will begin	n reporting again in				
		d complete. I understand that records from a Section 42808 (a) (3) of the California Food			
REPORTING MONTH	PRINT NAME OF PERSON COMPLETING REF	PORT SIGNATURE	DATE		

Print out this form and mail it with payment to: Cashier Department of Food and Agriculture 1220 N Street, P.O. Box 942872 Sacramento, CA 94271-2872

#### Instructions

Type in your information below and print out this form and sign and mail it with payment to: Cashier Department of Food and Agriculture 1220 N Street, P.O. Box 942872

- 1 Enter the name of the fresh fruits and/or vegetables in column 1.
- Containers are defined as any hand carried type container; e.g., box, crate, lug, carton. For bulk shipping containers that cannot be hand carried, divide the pounds held by the bulk containers by 50 pounds and enter that number in column 2 or column 3 (see below).
- If the commodity is subject to a mandatory inspection under a Federal or State marketing order, law or county ordinance, use column 2. (See attached list)
- If the commodity is not subject to a mandatory inspection under a Federal or State marketing order, law or county ordinance, use column 3. (See attached
- Multiply the number of reported containers by the assessment rate shown in the column heading. Write that amount in column 4 (e.g., if you reported 1000 containers shipped in column 3, multiply 1000 X \$0.003 and enter \$3.00 in column 4).
- Subtotal all the column amounts.
- Fees shall be paid no later than the last day of the month following the month for which the fee is payable. Handlers who fail to pay the fee within the prescribed time shall pay a penalty of 10 percent of the amount due and, in addition, 1-1/2 percent interest per month.

  Write in the amount of the penalty and interest owed. If none, write 0.
- Write in the sum of all amounts entered in column 4 including penalties, if appli This is the amount to send to the Department Cashier.
- Remember to send in this form each month, even if you have not shipped any fruits, nuts, or vegetables. Indicate "No Shipments Made", "Nothing to Report" or a similar statement.
- If done shipping for season, check "Last report for the season" and indicate month and year when shipping will start again. It is not necessary to send in "C reports for those months.
- After typing your information in, print this form and mail it with payment.

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STATE OF CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE **FVEQC--STANDARDIZATION** 

## 40.11.01 EACH MONTH SEND REMITTANCE

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Cashier Department of Food and Agriculture 1220 N Street, P.O. Box 942872 Sacramento, CA 94271-2872

### Fruit and Vegetable Shipper Monthly Remittance Report/Registration 51-055 (Rev. 05/02)

COMPANY NAME		REGISTRATION NUMBER			
P.O. BOX/STREET ADDRESS		AREA CODE AND TELEPHONE NUMBER			
CITY, STATE, AND ZIP CODE		DUE DATE: Submit on the last day of the reporting Month (See # 7 on the reverse side of this form for penalty information)			
G Check this box if any of the above information has changed					
(1) Commodity	(2) Number of Containers Shipped (@ \$0.0005)	(3) Number of Containers Shipped (@ \$0.0015)	(4) Assessment Amount		
SUBTOTAL					
NOTE: If there are no shipments to report, this form must be submitted indicating "No Shipments Made" or "Nothing to Report"					
		TOTAL			
G Last report for the season. Will begin reporting again in  I hereby certify that to the best of my knowledge and belief, this report is true and complete. I understand that records from which this report was compiled are subject to audit by the Department of Food and Agriculture per Section 42808 (a) (3) of the California Food and Agricultural Code.					
REPORTING MONTH	PRINT NAME OF PERSON COMPLETING REPORT	SIGNATURE	DATE		

Print out this form and sign and mail it with payment to the address above.